

<i>SERFF Tracking Number:</i>	<i>MEAM-127206763</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>MedAmerica Insurance Company</i>	<i>State Tracking Number:</i>	<i>49020</i>
<i>Company Tracking Number:</i>			
<i>TOI:</i>	<i>LTC06 Long Term Care - Other</i>	<i>Sub-TOI:</i>	<i>LTC06.000 Long Term Care - Other</i>
<i>Product Name:</i>	<i>AR-MedAmerica Denied Claims, Lapse/Replacement and Suitability Reports</i>		
<i>Project Name/Number:</i>	<i>AR- MedAmerica Denied Claims, Lapse/Replacement and Suitability Reports /AR- MedAmerica Denied Claims, Lapse/Replacement and Suitability Reports</i>		

## Filing at a Glance

Company: MedAmerica Insurance Company

Product Name: AR-MedAmerica Denied Claims, Lapse/Replacement and Suitability Reports  
 SERFF Tr Num: MEAM-127206763 State: Arkansas

TOI: LTC06 Long Term Care - Other  
 SERFF Status: Closed-Accepted For Informational Purposes  
 State Tr Num: 49020

Sub-TOI: LTC06.000 Long Term Care - Other  
 Co Tr Num:  
 State Status: Filed-Closed  
 Filing Type: Form  
 Reviewer(s): Harris Shearer, Stephanie Fowler  
 Author: Lorie Heimbuck  
 Date Submitted: 06/09/2011  
 Disposition Date: 06/27/2011  
 Disposition Status: Accepted For Informational Purposes  
 Implementation Date: Implementation Date Requested: On Approval

State Filing Description:

## General Information

Project Name: AR- MedAmerica Denied Claims, Lapse/Replacement and Suitability Reports	Status of Filing in Domicile:
Project Number: AR- MedAmerica Denied Claims, Lapse/Replacement and Suitability Reports	Date Approved in Domicile:
Requested Filing Mode:	Domicile Status Comments:
Explanation for Combination/Other:	Market Type: Individual
Submission Type: New Submission	Individual Market Type:
Overall Rate Impact:	Filing Status Changed: 06/27/2011
	State Status Changed: 06/27/2011
Deemer Date:	Created By: Lorie Heimbuck
Submitted By: Lorie Heimbuck	Corresponding Filing Tracking Number:
Filing Description:	
Annual Reports: Denied Claims, Lapse/Replacement and Suitability	

## Company and Contact

SERFF Tracking Number: MEAM-127206763 State: Arkansas  
 Filing Company: MedAmerica Insurance Company State Tracking Number: 49020  
 Company Tracking Number:  
 TOI: LTC06 Long Term Care - Other Sub-TOI: LTC06.000 Long Term Care - Other  
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### Filing Contact Information

Lorie Heimbeck, LTC Compliance Analyst lorie.heimbeck@medamericaltc.com  
 165 Court Street 585-238-4692 [Phone]  
 Rochester , NY 14647 585-238-3642 [FAX]

### Filing Company Information

MedAmerica Insurance Company CoCode: 69515 State of Domicile: Pennsylvania  
 165 Court Street Group Code: Company Type: Long Term Care  
 Insurance  
 Rochester, NY 14647 Group Name: State ID Number:  
 (585) 327-6522 ext. [Phone] FEIN Number: 34-0977231  
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### Filing Fees

Fee Required? Yes  
 Fee Amount: \$150.00  
 Retaliatory? No  
 Fee Explanation: 3 forms X \$50.00 per form  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
MedAmerica Insurance Company	\$150.00	06/09/2011	48498401

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Informational Purposes	Stephanie Fowler	06/27/2011	06/27/2011

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## **Disposition**

Disposition Date: 06/27/2011

Implementation Date:

Status: Accepted For Informational Purposes

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: MEAM-127206763 State: Arkansas

Filing Company: MedAmerica Insurance Company State Tracking Number: 49020

Company Tracking Number:

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		No
Supporting Document	Application		No
Supporting Document	Health - Actuarial Justification		No
Supporting Document	Outline of Coverage		No
Supporting Document	Denied Claims Report	Accepted for Informational Purposes	No
Supporting Document	Lapse/Replacement Report	Accepted for Informational Purposes	No
Supporting Document	Suitability Report	Accepted for Informational Purposes	No

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## Supporting Document Schedules

	Item Status:	Status Date:
<b>Bypassed - Item:</b> Flesch Certification <b>Bypass Reason:</b> N/A <b>Comments:</b>		
<b>Bypassed - Item:</b> Application <b>Bypass Reason:</b> N/A <b>Comments:</b>		
<b>Bypassed - Item:</b> Health - Actuarial Justification <b>Bypass Reason:</b> N/A <b>Comments:</b>		
<b>Bypassed - Item:</b> Outline of Coverage <b>Bypass Reason:</b> N/A <b>Comments:</b>		
<b>Satisfied - Item:</b> Denied Claims Report <b>Comments:</b> <b>Attachment:</b> AR_69515_denied_2010_116_I.pdf	Accepted for Informational Purposes	06/27/2011

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	Item Status:	Status Date:
<b>Satisfied - Item:</b> Lapse/Replacement Report	Accepted for Informational Purposes	06/27/2011
<b>Comments:</b>		
<b>Attachment:</b> AR_69515_rep_lapse_2010_116.pdf		

	Item Status:	Status Date:
<b>Satisfied - Item:</b> Suitability Report	Accepted for Informational Purposes	06/27/2011
<b>Comments:</b>		
<b>Attachment:</b> AR_69515_suit_2010_116.pdf		

# Long-Term Care Insurance Claims Denial Reporting Form

For The State of ARKANSAS  
For The Reporting Year of 2010

Company Name MedAmerica Insurance Company  
Address: Administrative Office: 165 COURT STREET  
ROCHESTER,NY 14647  
NAIC Number: 69515  
Contact Person Lorie A. Heimbuck, Esq. Phone Number: 1-800-544-0327

Line of Business Individual

## Instructions:

The purpose of this form is to report all long-term claim denials under in force long-term care policies or insurance policies.

Indicate the manner of reporting by checking one of the boxes below:

☐ Per Claimant - counts each individual who makes one or a series of claim request:

☒ Per Transaction - counts each claim payment request

"Denied" means a claim that is not paid for any reason other than for claims not paid for failure to meet the waiting period or because and applicable preexisting condition. It does not include a request for payment that is in excess of the applicable contractual limits.

Inforce Data		State Data	Nationwide Data
	Total Number of Inforce Policies as of December 31st	315	34972
Claims and Denial Data		State Data	Nationwide Data
1	Total Number of Long-Term Care Claims Reported	23	5969
2	Total Number of Long-Term Care Claims Denied/Not Paid	0	385
3	Number of Claims Not Paid due to Preexisting Condition Exclusion	0	0
4	Number of Claims Not Paid due to Waiting (Elimination) Period Not Met	0	194
5	Net Number of Long-Term Care Claims Denied for Reporting Purposes (Line 2 Minus Line 3 Minus Line 4)	0	191
6	Percentage of Long-Term Care Claims Denied of Those Reported (Line 5 Divided By Line 1)	0%	3.2%
7	Number of Long-Term Care Claims Denied due to:		
8	Long-Term Care Services Not Covered under the Policy	0	47
9	Provider/Facility Not Qualified under the Policy	0	0
10	Benefit Eligibility Criteria Not Met	0	35
11	Other: Duplicate Submission, Discharged from Facility, No Coverage in Policy, Incomplete Claim, Repayment of Overpayment	0	109



# **Long-Term Care Insurance Replacement and Lapse Reporting Form**

**For The State Of ARKANSAS**

**For The Reporting Year 2010**

Company Name    MedAmerica Insurance Company

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Address:            Administrative Office: 165 COURT STREET

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                         ROCHESTER,NY 14647

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NAIC Number:    69515

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Contact Person    Lorie A. Heimbuck, Esq.

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Phone Number:   1-800-544-0327

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**Instructions:** The purpose of this form is to report, on a statewide basis, information regarding long-term care insurance policy replacement and lapses. Specifically, every insurer shall maintain records for each agent on that agent's amount of long-term care insurance replacement sales as a percent of the agent's total annual sales and the amount of lapses of long-term care insurance policies sold by the agent as a percent of the agent's total annual sales. The tables below should be used to report the ten percent (10%) of the insurer's agents with the greatest percentages of replacement and lapses.

Listing of the 10% of Agents with the Greatest Percentage of Replacements

Agent's Name	Number of Policies Sold By This Agent	Number of Policies Replaced By This Agent	Number of Replacements As % of Number Sold By This Agent
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Listing of the 10% of Agents with the Greatest Percentage of Lapses

Agent's Name	Number of Policies Sold By This Agent	Number of Policies Lapsed By This Agent	Number of Lapses As % of Number Sold By This Agent
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Company Totals:

Percentage of Replacement Policies Sold to Annual Sales	<1%
Percentage of Replacement Policies Sold to Policies In Force (as of the end of the preceding calendar year)	<1%
Percentage of Lapsed Policies Sold to Annual Sales	433.3%
Percentage of Lapsed Policies Sold to Policies In Force (as of the end of the preceding calendar year)	4%

# Suitability Report for 2010

Company Name: MedAmerica Insurance Company

NAIC Company Code: 69515

1.	Total Number of Applications Received from residents of Arkansas	11
2.	Number of Applicants Who Declined to Provide Information on the Personal Worksheet	1
3.	Number of Applicants Who Did Not Meet the Suitability Standards	0
4.	Number of Those Who Chose to Confirm After Receiving A Suitability Letter	1